

American Cancer Society Cancer Action Network 555 11<sup>th</sup> Street, NW Suite 300 Washington, DC 20004 202.661.5700 www.acscan.org

July 10, 2015

Sylvia Mathews Burwell, Secretary
Department of Health and Human Services
Hubert H. Humphrey Building
200 Independence Avenue, SW
Washington, D.C. 20201

Re: Iowa Health and Wellness Plan: NEMT Waiver Amendment

Dear Secretary Burwell:

The American Cancer Society Cancer Action Network (ACS CAN) appreciates the opportunity to comment on the Iowa Health and Wellness Plan's proposed waiver for non-emergency medical transportation (NEMT). ACS CAN, the nonprofit, nonpartisan advocacy affiliate of the American Cancer Society, supports evidence-based policy and legislative solutions designed to eliminate cancer as a major health problem. As the nation's leading advocate for public policies that are helping to defeat cancer, ACS CAN ensures that cancer patients, survivors, and their families have a voice in public policy matters at all levels of government.

ACS CAN strongly supports expanded access to health care coverage through state Medicaid programs. Over 17,140 lowans are expected to be diagnosed with cancer this year<sup>1</sup> – many of whom will rely on Medicaid for their care. We are concerned the continued use of the NEMT waiver may create barriers to cancer screenings, diagnostic, and treatment services for low-income lowans.

ACS CAN opposes lowa's requests to continue waiving NEMT service for individuals who are not medically exempt. In support of its NEMT waiver, lowa provides data from a University of Iowa Public Policy Center survey. However, this survey also demonstrated that 5 percent of Marketplace Choice enrollees surveyed and 15 percent of Wellness Plan enrollees surveyed reported not being able to receive transportation to or from a health care visit. Thus, for these individuals, lack of transportation equates to lack of access to their health care services and providers.

After receiving a cancer diagnosis, one of the most difficult challenges patients face is getting to and from treatment. Oncology practitioners often counsel cancer patients not to drive following treatment. That's because chemotherapy leaves patients fatigued, and some of the medications administered along with chemotherapy tend to make patients drowsy and unable to drive themselves or use public transportation. In addition, many cancer patients – particularly those with low or limited incomes – do not own a vehicle, cannot afford public transportation, or do not live in an area where public transportation is readily accessible. Often patients do not have a family member or friend who is available to provide regular assistance with transportation. Individuals with cancer need regular access

<sup>&</sup>lt;sup>1</sup> American Cancer Society, <u>Cancer Facts & Figures 2015</u>, available at <a href="http://www.cancer.org/research/cancerfactsstatistics/cancerfactsfigures2015/">http://www.cancer.org/research/cancerfactsstatistics/cancerfactsfigures2015/</a>.

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to care and cancer treatment services and when that access is disrupted – as it could be when the individual lacks transportation to the health care service – the effectiveness of the treatment could be jeopardized and the individual's chance of survival could be significantly reduced.

NEMT is also used by individuals to obtain access to preventive services, such as cancer screenings. Early detection of cancer generally results in less expensive treatments and better health outcomes. Further, colorectal and cervical cancer screenings can prevent cancer by detecting and removing precancerous lesions. However, lack of transportation to screening services hinders an individual's ability to obtain the necessary screening and thus for some individuals could result in detection of cancer at a later stage.

## Conclusion

On behalf of the American Cancer Society Cancer Action Network we thank you for the opportunity to comment on the non-emergency medical transportation waiver to the lowa Health and Wellness Plan. If you have any questions, please feel free to contact me or have your staff contact Anna Schwamlein Howard, Policy Principal, Access and Quality of Care at Anna. Howard@cancer.org or 202-585-3261.

Sincerely,

Kirsten Sloan

Senior Policy Director

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American Cancer Society Cancer Action Network